

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

10/018104

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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2-1380 (5-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. GOVERNMENT PRINTING OFFICE: 1964 10-1200

TOTAL
IND.
TOTAL
DEP.
TOTAL
CLAIMS

1

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